

CITY COUNCIL

BENEFIT SUMMARY SHEET

COMPENSATION: \$1075/month

FRINGE BENEFITS AND WELLNESS

- **MEDICAL**
City medical plan premium paid for member/family up to \$1,200/month
- **DENTAL INSURANCE**
Employer paid family coverage
- **EMPLOYEE ASSISTANCE PROGRAM (EAP)**
Available to employees and dependents
- **VISION PLAN**
City paid for employee only
Dependents maybe added at additional cost
- **LIFE INSURANCE**
City paid \$50,000 policy
- **ACCIDENTAL DEATH & DISMEMBERMENT INSURANCE**
Non work-related accident up to \$52,000
Work-related accident up to an additional \$50,000
- **MEDICARE COVERAGE**
Provided for employees hired after April 1, 1986

RETIREMENT BENEFITS

- **RETIREMENT - PERS 2.5% @ 55**
8% Employer Paid Member Contribution (EPMC)
reported as Special Compensation
- **RETIREMENT HEALTH SAVINGS PLAN (RHS)**
City contributes \$100.00/month
- **RETIREE MEDICAL TRUST**
\$50.00/per pay period employee contribution
\$50.00/per pay period City contribution
- **\$457 DEFERRED COMPENSATION PLAN**
City matches \$457 deferred compensation
employee contribution up to \$100.00/month

MISCELLANEOUS

- **WELLNESS**
Up to \$500.00/year for physical examination
- **REDEVELOPMENT AGENCY MEETINGS**
\$25.00/meeting
- **WORKERS COMPENSATION**
City is self insured and provides coverage to member

THIS IS PROVIDED AS A SUMMARY OF BENEFITS AND DOES NOT CONFER ANY RIGHTS UPON ANY EMPLOYEE. PLEASE REFER TO THE APPROPRIATE RESOLUTION FOR A MORE DETAILED DISCUSSION OF THESE BENEFITS.

Revised 12/01/10